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In	re	app	lica	tion	of:

Wiggesholf et al.

Atty. Docket No.: 50T5424.01/1661

Serial No.:

10/638,843

Filing Date

August 11, 2003

Title:

System And Method For Effectively Implementing A Dynamic User Interface In An Electronic network

COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450

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-1	*
	1.

Transmitted herewith is an amendment in the above-identified application.

- Small entity status of this application under 37 CFR §§ 1.9 and 1.27 has been established by a verified statement previously submitted.
- A verified statement to establish small entity status under 37 CFR §§ 1.9 and 1.27 is enclosed.
- No additional fee is required. [X]

The filing fee has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	Small Entity		or Other		Than a Small	
								Entity		
	Claims		Highest	Number of Extra	Rate	Additional		Rate	Additional	
	Remaining		Number	Claims Present		Fee	or		Fee	
	After		Previously							
	Amendment		Paid For							
Total	45	Minus	4 5	0	x \$11 =	\$0.00		x \$50 =	\$0.00	
Indep.	5	Minus	5	0	x \$41 =	\$0.00	or	x \$210 =	\$0.00	
[] First	[] First Presentation of Multiple Dependent Claims				+\$135 =	\$0.00		+\$270 =	\$0.00	
				Total	\$0.00		Total	\$0.00		
* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.				Fee			Fee			

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

[]	Please charge my Deposit Account No. 50-3367 in the amount of \$	A duplicate copy of this sheet is
attached	•	
[]	Enclosed please find a credit card payment form for \$	_for additional claims.
[X]	The Commissioner is hereby authorized to charge payment of the fo	llowing fees associated with this
commun	ication or credit any overpayment to Deposit Account No. 50-3367. A	A duplicate copy of this sheet is attached.

- [X] Any filing fees under 37 CFR § 1.16 for the presentation of extra claims.
- [X] Any patent application processing fees under 37 CFR § 1.17.

Respectfully submitted,

6/9/08

Gregory J. Koerner, Reg.No. 38,519

Redwood Patent Law

1291 E. Hillsdale Blvd., Suite 205

Foster City, CA 94404 Tel: (650) 358-4000

Fax: (650) 358-4085

If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

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In re app	lication of:	V	Viggesholf et a	<i>j</i>	E SE	Atty. D	ock	et No.: 50 T	°5424.01/1661	
Serial No	: POTE	'3w 1	10/638,843 (JUN 2 3 2008)							
Filing Da	te JUN ? 3 7	الم (دع مالكان	August 11, 2003							
Title:	SHATE TRADEM	_&\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	System And Method For Effectively Implementing A Dynamic User Interface In An Electronic network							
P.O. Box	COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, Virginia 22313-1450									
Sir: Transmitted herewith is an amendment in the above-identified application. [] Small entity status of this application under 37 CFR §§ 1.9 and 1.27 has been established by a verified statement previously submitted. [] A verified statement to establish small entity status under 37 CFR §§ 1.9 and 1.27 is enclosed. [X] No additional fee is required.										
	g fee has been ca (Col. 1)	iculated	(Col. 2)	(Col. 3)	Sma	ll Entity	or		han a Small Intity	
	Claims Remaining After Amendment		Highest Number Previously Paid For	Number of Extra Claims Present	Rate	Additional Fee	or	Rate	Additional Fee	
Total	45	Minus	45	0	x \$11 =	\$0.00		x \$50 =	\$0.00	
Indep.	5	Minus	5	0	x \$41 =	\$0.00	or	x \$210 =	\$0.00	
[] First	Presentation of	Multiple	Dependent Cl	aims	+\$135 =	\$0.00		+\$270 =	\$0.00	
					Total	\$0.00		Total	\$0.00	
•	If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.			Fee			Fee			
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.										
If the Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or										
Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.										
[] Please charge my Deposit Account No. 50-3367 in the amount of \$ A duplicate copy of this sheet is attached.										

Please charge my Deposit Account No. 50-3367 in the amount of \$____. A duplicate copy of this sheet is attached.

[] Enclosed please find a credit card payment form for \$____ for additional claims.

[X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-3367. A duplicate copy of this sheet is attached.

[X] Any filing fees under 37 CFR § 1.16 for the presentation of extra claims.

[X] Any patent application processing fees under 37 CFR § 1.17.

Respectfully submitted,

Dated: 6/9/08

Gregory J. Kberner, Reg.No. 38,519

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1291 E. Hillsdale Blvd., Suite 205

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Fax: (650) 358-4085



IN THE

UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICANT(S): Wiggeshof et al.

APP. NO.:

10/638,843

FILED:

August 11, 2003

TITLE:

System And Method For Effectively Implementing

A Dynamic User Interface In An Electronic Network

EXAMINER:

Long, A.

ART UNIT:

2176

ATTY DKT NO:

50T5424.01/1661

CERTIFICATE OF MAILING

I hereby certify that this paper is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, op the date printed below:

Date: 6/19/02

Gregory J. Koerner

Response To Office Action

Mail Stop Amendment Commissioner for Patents P.O Box 1450 Alexandria, Virginia 22313-1450

Dear Sir:

In response to the Office Action mailed March 20, 2008, please reconsider the above-identified Application in light of the following remarks and amendments.